

**Ohio Department of Health
Information and Guidelines for Schools
regarding
Methicillin-resistant *Staphylococcus aureus* (MRSA)**

MRSA Overview

Staphylococcus aureus is a bacterium which can cause a variety of infections commonly referred to as “staph” infections. MRSA stands for methicillin-resistant *Staphylococcus aureus*. The MRSA bacteria cause staph infections that are resistant to treatment with the usual antibiotics.

MRSA occurs most frequently in health care facilities, but outbreaks have become more common in the community, particularly among school athletes. Such infections are generally mild and affect the skin with pimples or boils that can be swollen, painful and drain pus. They are often mistaken for spider bites.

MRSA Infection vs. Colonization

Staph, including MRSA, can be part of the bacteria that normally reside in or on humans and do not usually cause infection. When bacteria are living on or in the human body, but are not causing infection, it is called “colonization.” Humans are most often colonized with staph in the nose; it is also found on the skin and other body sites. The Centers for Disease Control and Prevention (CDC) estimates that up to 20 percent of the population is colonized with staph, many with MRSA.

Transmission of MRSA

MRSA is typically spread in the community in one of two ways: (1) direct person-to-person contact with a person who is colonized or has an active infection, or (2) indirectly through shared personal articles, such as towels, razors, clothing or athletic equipment. MRSA is not spread by coughing or sneezing. People who are colonized with MRSA bacteria are the most common source of transmission.

School Responsibility

Hand hygiene has been shown to be the most effective method of infection control for MRSA, the common cold and influenza. Allow time for frequent and thorough hand washing by students and staff members. Waterless hand sanitizers can be used as an alternative if soap and water are not available.

Students or staff members who are colonized with MRSA do not need to be routinely excluded from the classroom.

Unless directed by a physician, students with MRSA infections should not be excluded from attending school.

Exclusion from school should be reserved for those with wound drainage ("pus") that cannot be covered and contained with a clean, dry bandage and for those who cannot maintain good personal hygiene.

Students with active infections should be excluded from activities where skin-to-skin contact is likely to occur (e.g., sports) until their infections are healed.

Schools should refrain from closing classrooms or buildings due to MRSA infections in students or staff members. Closing schools has not been found to be effective in reducing the spread of MRSA from one person to another.

Students or staff members who are severely immunocompromised should not share a classroom with a person who has an active MRSA infection. Your school nurse is a resource for information about students who may have increased risk.

Students with open wounds should NOT use whirlpools, hydrotherapy pools, cold tubs, swimming pools, and other common tubs.

Routine cleaning of classrooms and common areas with standard cleaning products helps to prevent the spread of all potential infections including MRSA. Special attention should be given to surfaces and equipment that students and staff touch with their hands, such as light switches, door handles, desks, tables and keyboards,. If contamination of a surface with the MRSA bacteria has occurred, clean the area using a 10 percent bleach solution or Environmental Protection Agency (EPA)-registered disinfectant effective at removing MRSA from the environment.

- It is important to read the instruction labels on all cleaners to make sure they are used safely and appropriately.
- Environmental cleaners and disinfectants should not be used to treat infections.
- The EPA provides a list of EPA-registered products effective against MRSA: <http://epa.gov/oppad001/chemregindex.htm>